



**STATE OF TENNESSEE  
DEPARTMENT OF FINANCE & ADMINISTRATION  
EMAIL DEPOSIT NOTIFICATION FORM (EDNF)**

As a supplier to the State of Tennessee, you are offered the convenience of having remittance advices emailed to you one business day prior to the date of deposit of certain impending electronic direct deposits from the state. The email deposit notification(s) will contain an attachment of your ACH remittance advice(s) and will be delivered from the email address F\_A.Accounts@tn.gov. **Please add this email address to your address book or safe list.** The attachment will be in Portable Document Format (PDF) and will require Adobe Acrobat Reader for viewing. Viewing capability of your deposits is also available through the Edison Supplier Portal.

Complete Sections 1 through 4 below using the PDF fillable form. Section 4 allows you the option to digitally sign and use the SUBMIT button to email the form to F\_A.Accounts@tn.gov **OR** you may print, hand-sign, and mail the form to:

State of Tennessee  
Attn: Supplier Maintenance  
21st Floor WRS Tennessee Tower  
312 Rosa L Parks Ave  
Nashville, TN 37243

A reply email will be sent to confirm processing of your request. Should you have any questions or need assistance, contact Supplier Maintenance at 615-741-9745.

<b>SECTION 1: SUPPLIER INFORMATION</b> – These fields are <b>required</b> and must match the information already on file with the State of Tennessee.	
Supplier Name:	
Federal Employer Identification Number (FEIN):	or Social Security Number (SSN):
<i>(No dashes)</i>	<i>(No dashes)</i>
Edison Vendor/Supplier ID:	Full Bank Account Number:
<b>SECTION 2: TYPE OF REQUEST</b> – Check only <b>one</b> box and complete the fields for that selection.	
<b>Add new</b> email address. Enter the email address to which the remittance advices should be sent (enter only one email address):	
<b>Change</b> existing email address:	
<b>From:</b>	
<b>To:</b>	
<b>Cancel</b> the email service for the existing email address:	
<b>SECTION 3: CONTACT INFORMATION</b> – These fields are <b>required</b> . The Contact Name may be contacted for more information.	
Contact Name:	Contact Number:
<b>SECTION 4: AUTHORIZATION</b> – By completing Section 4, you are authorizing the State of TN to send email notifications 1 business day prior to deposits posting to your account. This will remain in effect until the State receives and processes an updated EDNF.	
<p>Check this box to indicate you will be digitally signing the form then clicking the Submit button below to email the form to F_A.Accounts@tn.gov.</p> <p>Click the digital signature box below to digitally sign and save the form. <b>You will not be able to make changes to the form after you have digitally signed the form.</b></p> <p><b>After you have digitally signed the form using an Adobe self-signed certificate, click the Submit button below to attach this form to an email in order to email the form to F_A.Accounts@tn.gov.</b></p>	<p>Check this box to indicate you will be printing and hand-signing the completed form then submitting the form via mail to the address above.</p> <p>Print Name: _____</p> <p>Signature: _____</p> <p>Date: _____</p>